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CONFIRMATION NO. 6045

Bib Data Sheet

<b>SERIAL NUMBER</b> 09/719,889	<b>FILING OR 371(c) DATE</b> 02/21/2001 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1654	<b>ATTORNEY DOCKET NO.</b> 12724-002001
<b>APPLICANTS</b> Earl R. Owen, Lane Cove, AUSTRALIA; Peter Maitz, Lane Cove, AUSTRALIA; Rodney I. Trickett, North Rocks NSW, AUSTRALIA; Judith M. Dawes, Epping NSW, AUSTRALIA; James A. Piper, Pennant Hills NSW, AUSTRALIA; Peter Dekker, Elanora NSW, AUSTRALIA;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/AU99/00495 06/18/1999				
<b>** FOREIGN APPLICATIONS *****</b> AUSTRALIA PP 4214 06/18/1998				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 03/09/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> AUSTRALIA	<b>SHEETS DRAWING</b> 12	<b>TOTAL CLAIMS</b> 28
<b>INDEPENDENT CLAIMS</b> 2				
<b>ADDRESS</b> 25225				
<b>TITLE</b> METHOD OF TISSUE REPAIR II				
<b>FILING FEE RECEIVED</b> 1443	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	